

FORM **SBO-2**
(12-14-2001)

U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

**2001 SURVEY OF BUSINESS OWNERS
AND SELF-EMPLOYED PERSONS**

In correspondence pertaining to this report,
please refer to this Census File Number (CFN)

DUE DATE:
30 days after receipt of form

SBO-2

If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right.

Please mail to:

**U.S. Department of Commerce
U.S. Census Bureau
1201 East 10th Street
Jeffersonville, IN 47134-0001**

*For assistance, 8:00 a.m.
to 5:00 p.m., eastern time.
Monday through Friday:
1-888-225-4022*

Please correct errors in name, address, and ZIP Code. ENTER street and number if not shown.

INSTRUCTIONS — PLEASE READ

The purpose of this questionnaire is to collect information about the gender, race, and ethnic background of business owners in the United States for the year 2001. The business owner(s) should complete this questionnaire even if the business has since been sold, reorganized, or discontinued. Data provided by you will be used only for statistical purposes and will be kept strictly confidential. The race and ethnic categories have been established by the Office of Management and Budget to assure uniform reporting to all Federal agencies.

These data are needed to evaluate the extent and growth of business ownership in order to provide a framework for assessing and directing Federal, state, and local government business assistance programs. The Small Business Administration and the Minority Business Development Agency use these data when allocating resources for their business assistance programs. The data are also widely used by private firms and individuals to evaluate their own businesses and markets, by the media for news stories, and by researchers and academia for determining firm characteristics.

We estimate that it will take 10 minutes or less to complete this questionnaire. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Paperwork Reduction Project 0607-0725, Room 3110, Federal Building 3, U.S. Census Bureau, Washington, DC 20233-1500. You may e-mail comments to **paperwork@census.gov**; use "Paperwork Project 0607-0725" as the subject. You are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. This 8-digit number appears at the top of this page.



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PLEASE TURN THIS FORM OVER AND COMPLETE THE QUESTIONNAIRE

Please round percentages to the nearest whole number
(Example: 33-1/3% should be reported as 33%).

- Give the percent of ownership of this business by **gender of the owner(s)**. Percent of ownership should be based on the rights, claims, interests, or stock in the business.


<div> <div></div> <div></div> <div></div> </div>	%	Male
<div> <div></div> <div></div> <div></div> </div>	%	Female
<div> <div></div> <div></div> <div></div> </div>	%	Stock publicly held or owned by other organizations – <i>If greater than 50%, Skip to item 5</i>
<div> <div></div> <div></div> <div></div> </div>	%	Total (Should add to 100%)

- Are **any** of the owners of this business Spanish/Hispanic/Latino?

☐ **No**, not Spanish/Hispanic/Latino – Skip to item 3

☐ **Yes** – Please continue with item 2b


- Give the percent of ownership of this business by Spanish/Hispanic/Latino origin of the owner(s).

<div><div></div><div></div></div>	<div><div></div><div></div></div>	% Cuban
<div><div></div><div></div></div>	<div><div></div><div></div></div>	% Mexican, Mexican Am., Chicano
<div><div></div><div></div></div>	<div><div></div><div></div></div>	% Puerto Rican
<div><div></div><div></div></div>	<div><div></div><div></div></div>	% Spaniard
<div><div></div><div></div></div>	<div><div></div><div></div></div>	% Hispanic Latin American – <i>Specify</i>  (Please print)

% Other Spanish/Hispanic/Latino – Specify *↙* (Please print)

**Continue
with item 3**

- Give the percent of ownership of this business by **race of the owner(s)**. Each owner should identify with the one race he/she considers himself/herself to be.

<div><div></div><div></div></div>	%	African Am./Black/Negro
<div><div></div><div></div></div>	%	Amer. Indian or Alaska Native
<div><div></div><div></div></div>	%	Asian Indian
<div><div></div><div></div></div>	%	Chinese
<div><div></div><div></div></div>	%	Filipino
<div><div></div><div></div></div>	%	Japanese
<div><div></div><div></div></div>	%	Korean
<div><div></div><div></div></div>	%	Vietnamese
<div><div></div><div></div></div>	%	Other Asian – Specify  (Please print)

- 4.** Mark (X) the **ONE** box that reflects the **number of owners** of this business.

<input type="checkbox"/> 1	<input type="checkbox"/> 6
<input type="checkbox"/> 2	<input type="checkbox"/> 7
<input type="checkbox"/> 3	<input type="checkbox"/> 8
<input type="checkbox"/> 4	<input type="checkbox"/> 9
<input type="checkbox"/> 5	<input type="checkbox"/> 10
	<input type="checkbox"/> More than 10 - Specify →

- 5. Did any of this business's receipts in 2001 result from business conducted with the Federal government?**

☐ Yes ☐ No

**Continue
with item 6**

*Thank you for
completing this form.*

**Please return this
report in the
enclosed
envelope
to:**

U.S. Department of Commerce
U.S. Census Bureau
1201 East 10th Street
Jeffersonville, IN 47134-0001

- 6. CONTACT PERSON** - Please print name of person responsible for completing this report.

[illegible]

MONTH	DAY	YEAR	TELEPHONE (including area code)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>

Signature

**Continue
with item 4**

